

# PATENT APPLICATION FEE DETERMINATION RECORD

Effective November 10, 1998

Application or Docket Number

2720410

## CLAIMS AS FILED - PART I

(Column 1)

(Column 2)

| FOR                              | NUMBER FILED   | NUMBER EXTRA |
|----------------------------------|----------------|--------------|
| BASIC FEE                        |                |              |
| TOTAL CLAIMS                     | 40 minus 20= * | 20           |
| INDEPENDENT CLAIMS               | 5 minus 3 = *  | 2            |
| MULTIPLE DEPENDENT CLAIM PRESENT |                |              |

\* If the difference in column 1 is less than zero, enter "0" in column 2

## CLAIMS AS AMENDED - PART II

(Column 1)

(Column 2)

(Column 3)

| AMENDMENT A                                    |   | CLAIMS REMAINING AFTER AMENDMENT |       | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|--|---|----------------------------------|-------|------------------------------------|---------------|
| Total  | * | 64                               | Minus | ** 40                              | = 24          |
| Independent                                    | * | 9                                | Minus | *** 5                              | = 4           |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                                  |       |                                    |               |

(Column 1)

(Column 2)

(Column 3)

| AMENDMENT B                                    |   | CLAIMS REMAINING AFTER AMENDMENT |       | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|--|---|----------------------------------|-------|------------------------------------|---------------|
| Total  | * | 64                               | Minus | ** 64                              | =             |
| Independent                                    | * | 9                                | Minus | *** 9                              | =             |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                                  |       |                                    |               |

(Column 1)

(Column 2)

(Column 3)

| AMENDMENT C                                    |   | CLAIMS REMAINING AFTER AMENDMENT |       | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|--|---|----------------------------------|-------|------------------------------------|---------------|
| Total  | * | 64                               | Minus | ** 64                              | =             |
| Independent                                    | * | 9                                | Minus | *** 9                              | =             |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                                  |       |                                    |               |

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

| RATE   | FEE    |    | RATE   | FEE    |
|--------|--------|----|--------|--------|
|        | 380.00 | OR |        | 760.00 |
| X\$ 9= |        | OR | X\$18= | 20.00  |
| X39=   |        | OR | X78=   | 40.00  |
| +130=  |        | OR | +260=  |        |
| TOTAL  |        | OR | TOTAL  | 20.00  |

SMALL ENTITY

OR OTHER THAN SMALL ENTITY

| RATE             | ADDITIONAL FEE |    | RATE             | ADDITIONAL FEE |
|------------------|----------------|----|------------------|----------------|
| X\$ 9=           |                | OR | X\$18=           | 2              |
| X39=             |                | OR | X78=             |                |
| +130=            |                | OR | +260=            |                |
| TOTAL ADDIT. FEE |                | OR | TOTAL ADDIT. FEE |                |

| RATE             | ADDITIONAL FEE |    | RATE             | ADDITIONAL FEE |
|------------------|----------------|----|------------------|----------------|
| X\$ 9=           |                | OR | X\$18=           |                |
| X39=             |                | OR | X78=             |                |
| +130=            |                | OR | +260=            |                |
| TOTAL ADDIT. FEE |                | OR | TOTAL ADDIT. FEE |                |

| RATE             | ADDITIONAL FEE |    | RATE             | ADDITIONAL FEE |
|------------------|----------------|----|------------------|----------------|
| X\$ 9=           |                | OR | X\$18=           |                |
| X39=             |                | OR | X78=             |                |
| +130=            |                | OR | +260=            |                |
| TOTAL ADDIT. FEE |                | OR | TOTAL ADDIT. FEE |                |

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

# PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

09/272,542

## CLAIMS AS FILED - PART I

(Column 1) (Column 2)

|   |               |              |
|---|---------------|--------------|
| TOTAL CLAIMS  |               |              |
| FOR   | NUMBER FILED  | NUMBER EXTRA |
| TOTAL CHARGEABLE CLAIMS                                   | 64 minus 20 = | * 44         |
| INDEPENDENT CLAIMS  | 9 minus 3 =   | * 6          |
| MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/> |               |              |

\* If the difference in column 1 is less than zero, enter "0" in column 2

## CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

|             |   |                                  |    |                                    |               |
|-------------|---|----------------------------------|----|------------------------------------|---------------|
| AMENDMENT A |   | CLAIMS REMAINING AFTER AMENDMENT |    | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|             | Total   | *                                | 64 | Minus                              | ** 64 =       |
|             | Independent   | *                                | 9  | Minus                              | *** 9 =       |
|             | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |    |                                    |               |

SMALL ENTITY TYPE ☐

OR

OTHER THAN SMALL ENTITY

|           |        |
|-----------|--------|
| RATE      | FEE    |
| BASIC FEE | 355.00 |
| X\$ 9=    |        |
| X40=      |        |
| +135=     |        |
| TOTAL     |        |

OR

|           |         |
|-----------|---------|
| RATE      | FEE     |
| BASIC FEE | 710.00  |
| X\$18=    | 792.00  |
| X80=      | 480.00  |
| +270=     |         |
| TOTAL     | 1982.00 |

SMALL ENTITY

OR

OTHER THAN SMALL ENTITY

|                  |                |
|------------------|----------------|
| RATE             | ADDITIONAL FEE |
| X\$ 9=           |                |
| X40=             |                |
| +135=            |                |
| TOTAL ADDIT. FEE |                |

OR

|                  |                |
|------------------|----------------|
| RATE             | ADDITIONAL FEE |
| X\$18=           |                |
| X80=             |                |
| +270=            |                |
| TOTAL ADDIT. FEE |                |

(Column 1) (Column 2) (Column 3)

|             |   |                                  |    |                                    |               |
|-------------|---|----------------------------------|----|------------------------------------|---------------|
| AMENDMENT B |   | CLAIMS REMAINING AFTER AMENDMENT |    | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|             | Total   | *                                | 58 | Minus                              | ** 64 = 1     |
|             | Independent   | *                                | 7  | Minus                              | *** 9 =       |
|             | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |    |                                    |               |

|                  |                |
|------------------|----------------|
| RATE             | ADDITIONAL FEE |
| X\$ 9=           | 1              |
| X40=             | 1              |
| +135=            |                |
| TOTAL ADDIT. FEE |                |

OR

|                  |                |
|------------------|----------------|
| RATE             | ADDITIONAL FEE |
| X\$18=           |                |
| X80=             |                |
| +270=            |                |
| TOTAL ADDIT. FEE |                |

(Column 1) (Column 2) (Column 3)

|             |   |                                  |    |                                    |               |
|-------------|---|----------------------------------|----|------------------------------------|---------------|
| AMENDMENT C |   | CLAIMS REMAINING AFTER AMENDMENT |    | HIGHEST NUMBER PREVIOUSLY PAID FOR | PRESENT EXTRA |
|             | Total   | *                                | 58 | Minus                              | ** 64 = 1     |
|             | Independent   | *                                | 7  | Minus                              | *** 9 =       |
|             | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/> |                                  |    |                                    |               |

|                  |                |
|------------------|----------------|
| RATE             | ADDITIONAL FEE |
| X\$ 9=           | 1              |
| X40=             | 1              |
| +135=            |                |
| TOTAL ADDIT. FEE |                |

OR

|                  |                |
|------------------|----------------|
| RATE             | ADDITIONAL FEE |
| X\$18=           |                |
| X80=             |                |
| +270=            |                |
| TOTAL ADDIT. FEE |                |

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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It does NOT get mailed to the applicant.

# NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION NUMBER: 2725412

## Total Fee Calculation

| Fee Code                     | Total<br># Claims | Number<br>Extra | X     | Fee       | Fee        | =          | Total        |
|------------------------------|-------------------|-----------------|-------|-----------|------------|------------|--------------|
| Sm./Lg.                      |                   |                 |       |           |            |            |              |
| Basic Filing Fee             | 201/101           |                 |       |           | Sm. Entity | Lg. Entity |              |
| Total Claims >20             | 203/103           | <u>40</u>       | -20 = | <u>20</u> |            | <u>1</u>   | = <u>760</u> |
| Independent Claims >3        | 202/102           | <u>5</u>        | -3 =  | <u>2</u>  |            | <u>18</u>  | = <u>260</u> |
| Mult. Dep Claim Present      | 204/104           |                 |       |           |            | <u>78</u>  | = <u>156</u> |
| Surcharge                    | 205/105           |                 |       |           |            |            | =            |
| English Translation          | 139               |                 |       |           |            | <u>280</u> | = <u>130</u> |
| <u>TOTAL FEE CALCULATION</u> |                   |                 |       |           |            |            |              |
|                              |                   |                 |       |           |            |            | <u>1406</u>  |

Fees due upon filing the application:

Total Filing Fees Due = \$ 1406.00

Less Filing Fees Submitted - \$                     

BALANCE DUE = \$ 1406.00

Patille  
Office of Initial Patent Examination